

02-11-02

Attorney Docket No. 17326CIP2 (BOT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

A

02/08/02
J1054 U.S. PTO

J1011 U.S. PTO
10/07/02
02/08/02

Applicant: BRIN, et al.

Examiner: A. Harris (Parent Appl.)

Serial No.: Pending

Group Art Unit: 1642 (Parent Appl.)

Filed: Herewith

For: METHODS FOR TREATING
MAMMARY GLAND DISORDERS

Irvine, California

NON-PROVISIONAL PATENT APPLICATION TRANSMITTAL LETTER

Box Patent Application
Assistant Commissioner for Patents
Washington, DC 20231

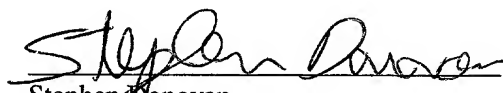
Sir/Madam:

Enclosed herewith are the following documents:

- (x) Transmittal Letter - 4 pgs
- (x) Specification (60 pages) 33 Claims (6 pages); Abstract (1 page)
- () Drawings (-0- sheets)
- (x) Declaration/Power of Attorney
- (x) Assignment w/Recordation Cover Sheet
- () Supplementary Information Disclosure w/prior art
- (x) Return/postage paid Postcard
- (x) Express Mail No. EL385558935US

This application claims priority to continuation in part application Serial Number 09/631,221 filed August 2, 2000 and to parent application Serial Number 09/454,842 filed December 7, 1999 issued as U.S. Patent 6,139,845.

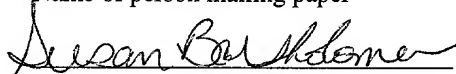
Dated: February 8, 2002


Stephen Donovan
Registration No. 33,433

CERTIFICATE OF EXPRESS MAIL UNDER 37 C.F.R. §1.10

I hereby certify that the above-identified documents are being deposited with the United States Postal Service on **February 8, 2002** in an envelope as "Express Mail Post Office To Addressee" mailing label number EL385558935US with sufficient postage for Express Mail addressed to Assistant Commissioner for Patents, Washington, D.C., 20231.

Date: February 8, 2002

Susan Bartholomew
Name of person mailing paper

Signature of person mailing paper

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NEW APPLICATION TRANSMITTAL FORM

To the Assistant Commissioner for Patents:

This is a Request for filing a NON-PROVISIONAL patent application under 37 CFR 1.53(b) entitled METHODS FOR TREATING MAMMARY GLAND DISORDERS by the following named inventors:

1	Full Name of Inventor	Last Name: BRIN	First Name: MITCHELL	Middle Name: F.	
	Residence and Citizenship	City: Newport Beach	State or Foreign Country: CALIFORNIA	Country Of Citizenship: U.S.A.	
	Post Office Address	Post Office Address: 30 San Antonio	City: Newport Beach	State or Country: CALIFORNIA	Zip Code: 92660
2	Full Name of Inventor	Last Name: DONOVAN	First Name: STEPHEN	Middle Name:	
	Residence and Citizenship	City: Capistrano	State or Foreign Country: CALIFORNIA	Country Of Citizenship: CANADA	
	Post Office Address	Post Office Address: 27252 Calle Anejo	City: Capistrano	State or Country: CALIFORNIA	Zip Code: 92624
3	Full Name of Inventor	Last Name:	First Name:	Middle Name:	
	Residence and Citizenship	City:	State or Foreign Country:	Country Of Citizenship:	
	Post Office Address	Post Office Address:	City:	State or Country:	Zip Code:

(X) The Commissioner is hereby authorized to use Deposit Account Number 01-0885 for the payment of any extension fees incurred during the prosecution of this application.

(X) Enclosed is a specification of 60 pages, 33 claims (6 pages) and an abstract (1 page).

Oath or Declaration

(X) Enclosed is an executed oath or declaration.

() Enclosed is an unsigned oath or declaration.

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(X) A self-addressed return postcard is enclosed for verification of receipt.

(X) The filing fee is calculated below:

FOR	NUMBER FILED	NUMBER EXTRA	RATE	FEE
Basic Fee (Large entity)			\$740.00	\$740.00
Total Claims	33 minus 20 =	13	\$18.00	\$234.00
Independent Claims	9 minus 3 =	6	\$84.00	\$504.00
If application contains any multiple dependent claims, then add			\$280.00	\$00.00
TOTAL FILING FEE				\$1478.00

- 400-555-0000
- (X) The Commissioner is hereby authorized to charge the filing fee and excess claim fees (including multiple dependent claim fee) as stated above to Deposit Account No. 01-0885. If this amount is incorrect, or for payment of any other fees that may be incurred as a result of this communication please use said Deposit Account. A duplicate copy of this sheet is enclosed for that purpose.
- (X) A copy of an assignment bestowing all interest in this application to Allergan Sales, Inc is enclosed.
- () New drawings are enclosed in _____ sheets.
- () A Statement Pursuant to 37 CFR §1.821(f) and a labeled diskette containing the computer readable sequence listing is enclosed.
- () A Statement Pursuant to 37 CFR §1.821(e), stating that the paper copy and the computer readable form are identical is filed herewith.
- () A properly labeled computer readable form of the Sequence Listing accompanies this Application.
- (X) The Power of Attorney in this application is to Stephen Donovan, Registration Number 33,433.
- (X) The Power of Attorney appears in the combined Declaration and Power of Attorney, filed herewith.
- () A copy of the Request for Extension of Time filed in the prior application is enclosed.

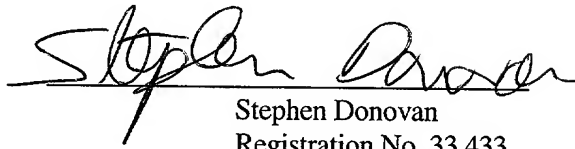
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Please address all future communications to:

STEPHEN DONOVAN
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T2-7H
2525 Dupont Drive
Irvine, CA 92612
Tel: 714-246-4026
Fax: 714-246-4249

Respectfully submitted,

Date: February 8, 2002

A handwritten signature in cursive script, appearing to read "Stephen Donovan", written over a horizontal line.

Stephen Donovan
Registration No. 33,433
Attorney of Record